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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/977,502			ing Date 15/2001	☐ To be Mailed
APPLICATION AS FILED – PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY											
	FOR	N	JMBER FIL	ED NL	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (f), r	or (m))	N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =			1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	the specification and drawing neets of paper, the application \$250 (\$125 for small entity) f dditional 50 sheets or fraction 5 U.S.C. 41(a)(1)(G) and 37 C		on size fee due) for each on thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						_			ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	03/10/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 28	Minus	·· 28	= 0		X \$25 =	0	OR	x s =	
	Independent (37 CFR 1,16(h))	· 2	Minus	···3	= 0	1	X \$105 =	0	OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	*	Minus	**	-	1	x \$ =		OR	x \$ =	
Ω	Independent (37 CFR 1.16(h))	٠	Minus	***	=		x \$ =		OR	x \$ =	
딟	Application Size Fee (37 CFR 1.16(s))					ı			ı		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOTAL ADOL PEE ADOL P											
"If the othry in column 1 is less than the entry in column 2, write "O" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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